

MULTIPLE DEPEN
CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10 / 541421

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT			
	IND.		DEP.		IND.		DEP.	
1	1							
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TOTAL IND.	15							
TOTAL DEP.	18							
TOTAL CLAIMS	21							

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT			
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TOTAL CLAIMS								